

CONNECT DIRECT CHECKLIST

Description of Task	Owner	Completed
Return Transmission Information		
Provided Contact Information: Name - Phone# - Email - Fax # -	Plan	
Provided User id and Password for Return file	Plan	
Provided Output Dataset Name	Plan	
Provided Local Node Name	Plan	
Provided TCP/IP Address or SNA information	Plan	
Provided Port	Plan	
Provided Environment	Plan	
Configured Firewall Information	Plan	
Configured C : D Process	CMS	

Description of Task	Owner	Completed
CMS Transmission Information		
Acquired C : D Process information: Local Node Name — TCP/IP Address — Port — Environment — or SNA Applid — Netid —	Plan	
Requested and Received CMS SPOE	Plan	
Configured C : D Process	Plan	
Provide Input Dataset Name to Plan	CMS Application	
Sent notification to CMSEFT_Admin mailbox that plan is ready for End-To-End Test	VIPS	